IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Iri re Patent Application of

SCS-124-1166 Atty Dkt.

2886

C# M#

SCOTT, et al

Serial No. 10/589,075

Examiner: M. LaPage

August 11, 2006 Date: October 23, 2009

TC/A.U.

SURFACE SHAPE MEASUREMENT APPARATUS AND METHOD Title:

Commissioner for Patents P.O. Box 1450 ¹ Alexandria, VA 22313-1450

Sir:

RESPONSE/AMENDMENT/LETTER

This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.

☐ Correspondence Address Indication Form Attached.

Fees are attached as calculated below:

Total effective claims after amendment 19 minus highest number previously paid for 23 (at least 20) = $0 \times 52.00 \$0.00 (1202)/\$0.00 (2)	202) \$	0.00
Independent claims after amendment 3 minus highest number previously paid for 3 (at least 3) = $0 \times 220.00 \$0.00 (1201)/\$0.00 (2)	201) \$	0.00
If proper multiple dependent claims now added for first time, (ignore improper); add \$390.00 (1203)/\$195.00 (2.00)	203) \$	0.00
Petition is hereby made to extend the current due date so as to cover the filing date of this paper and attachment(s) One Month Extension \$130.00 (1251)/\$65.00 (225 Two Month Extensions \$490.00 (1252)/\$245.00 (225 Four Month Extensions \$1110.00 (1253/\$555.00 (225 Four Month Extensions \$1730.00 (1254/\$865.00 (225 Five Month Extensions \$2350.00 (1255/\$1175.00 (225 Five Month Extensions \$2350.00 (225 Five Month E	52) 53) 254)	130.00
Terminal disclaimer enclosed, add \$140.00 (1814)/ \$70.00 (28	314) \$	0.00
☐ Applicant claims "small entity" status. ☐ Statement filed herewith		
Rule 56 Information Disclosure Statement Filing Fee \$180.00 (180	06) \$	0.00
Assignment Recording Fee \$40.00 (80)	21) \$	0.00
Other:	\$	0.00
TOTAL	FEE \$	130.00

CREDIT CARD PAYMENT FORM ATTACHED.

The Commissioner is hereby authorized to charge any <u>deficiency</u>, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140.

901 North Glebe Road, 11th Floor Arlington, Virginia 22203-1808 Telephone: (703) 816-4000 Facsimile: (703) 816-4100

SCS:kmm

NIXON & VANDERHYE P

By Atty: Stanley C. Spooner

Signature:

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